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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jarrod First name C Middle name	Michelle First name L Middle name
	Bring your picture identification to your meeting with the trustee.	Hull Last name and Suffix (Sr., Jr., II, III)	Hull Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8677	xxx-xx-5771

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Debtor 1 Jarrod C Hull
Debtor 2 Michelle L Hull

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	2143 Welworth Ave	If Debtor 2 lives at a different address:		
		Rockford, IL 61108 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago	, , , ,		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 1 Jarrod C Hull otor 2 Michelle L Hull			Case number (if known)	
Par	t 2: Tell the Court About	Your Bankruptcy Case	•		
7.	The chapter of the Bankruptcy Code you are		ef description of each, see <i>Notice Requi</i> to the top of page 1 and check the app	red by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto propriate box.	у
	choosing to file under	Chapter 7			
		☐ Chapter 11			
		☐ Chapter 12			
		☐ Chapter 13			
8.	How you will pay the fee	about how you rorder. If your att	may pay. Typically, if you are paying the torney is submitting your payment on your didress.	se check with the clerk's office in your local court for more detected by the second s	oney with
			he fee in installments. If you choose th <i>in Installment</i> s (Official Form 103A).	nis option, sign and attach the Application for Individuals to Po	ay
		☐ I request that n	ny fee be waived (You may request this	s option only if you are filing for Chapter 7. By law, a judge m	
				nly if your income is less than 150% of the official poverty line te fee in installments). If you choose this option, you must fill	
		the Application	to Have the Chapter 7 Filing Fee Waive	ed (Official Form 103B) and file it with your petition.	
9. Have you filed for ■ No					
٥.	bankruptcy within the	■ No.			
	last 8 years?	☐ Yes.	When	Coco number	
		District _ District	When When	Case number Case number	
		District _	When	Case number	
			Wildin		
10.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
		Debtor _		Relationship to you	
		District _	When	Case number, if known	
		Debtor _		Relationship to you	
		District _	When	Case number, if known	
11.	Do you rent your	□ No. Go to line	e 12.		
	residence?	■ Yes. Has your	landlord obtained an eviction judgment	against you and do you want to stay in your residence?	
			o. Go to line 12.		

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

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Deb	otor 2 Michelle L Hull		Case number (if known)
Par	Penort About Any Ru	ıcinaccac	You Own as a Sole Proprietor
		1311103303	Tou Own as a Sole i Tophietoi
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.
		☐ Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of hs, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).
	For a definition of small	■ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Anv	/ Hazardous Property or Any Property That Needs Immediate Attention
	Do you own or have any		
14.	property that poses or is	No.	
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?
	identifiable hazard to		what is the nazaru:
	public health or safety?		
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?
			Number, Street, City, State & Zip Code

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Debtor 1 Jarrod C Hull
Debtor 2 Michelle L Hull

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-82118 Doc 1 Filed 09/08/17 Entered 09/08/17 12:22:20 Desc Main Document Page 6 of 54

Deb	tor 1 Jarrod C Hull tor 2 Michelle L Hull		Document	i age o oi o-	Case numbe	「 (if known)		
Part	6: Answer These Quest	ions for Ren	oorting Purposes					
	What kind of debts do you have?	16a. <i>A</i>				ned in 11 U.S.C. § 101(8) as "incurred by an		
		[☐ No. Go to line 16b.					
		ı	Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		1	☐ No. Go to line 16c.					
		[☐ Yes. Go to line 17.					
		16c. S	State the type of debts you owe t	that are not consumer d	ebts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. G	Go to line 18.				
Do you estimate that after any exempt property is excluded a			am filing under Chapter 7. Do yare paid that funds will be availat			erty is excluded and administrative expenses		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	I	No					
		[□Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		☐ 1,000-5,000		<u></u> 25,001-50,000		
		□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000		☐ 50,001-100,000 ☐ More than100,000		
		☐ 100-199 ☐ 200-999		10,001-23,000		inore marroo,000		
19.	How much do you estimate your assets to	\$0 - \$50),000	□ \$1,000,001 - \$10		□ \$500,000,001 - \$1 billion		
	be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$5		☐ More than \$50 billion		
20.	How much do you estimate your liabilities	\$0 - \$50),000	<u> </u>		□ \$500,000,001 - \$1 billion		
	to be?		1 - \$100,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$10		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$100,000,001 - \$100,000,001		☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have exar	nined this petition, and I declare	under penalty of perjur	y that the inform	nation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
			ey represents me and I did not p I have obtained and read the no			t an attorney to help me fill out this		
		I request re	elief in accordance with the chap	oter of title 11, United Sta	ates Code, spec	cified in this petition.		
						r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Jarroc			Michelle L Hu	ıll		
		Jarrod C Signature of			helle L Hull nature of Debtor	· 2		
		Executed of	September 8, 2017 MM / DD / YYYY	Exe		otember 8, 2017 / DD / YYYY		

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Debtor 1	Jarrod C Hull	Document	Page 7 of 54		
Debtor 2	Michelle L Hull		Cas	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify the second of the control	ed States Code, and have	explained the relief av	ailable under each chapter
	not represented by ey, you do not need page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.			
		/s/ Gary C. Flanders	Date	September 8, 2	017
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Gary C. Flanders			
		Printed name			
		Bankruptcy Clinic			
		Firm name			
		1 Court Place			
		Rockford, IL 61101 Number, Street, City, State & ZIP Code			
		Number, Sueet, City, State & ZIF Code			

Email address

Contact phone **815-962-7084**

6180219Bar number & State

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		Docume	IL I auc o oi 34	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jarrod C Hull			
	First Name	Middle Name	Last Name	
Debtor 2	Michelle L Hull			
Spouse if, filing)	First Name	Middle Name	Last Name	
	and muntary Carret for that	NODTHEDNI DICTORT	NE ILLINOIS	
Jnited States Ba	ankrupicy Court for the:	NORTHERN DISTRICT C	- ILLINOIS	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$	0.00
		\$	
	1c. Copy line 63. Total of all property on Schedule A/B		4,680.00
Part 2	Te. Copy line oo, Total of all property on deficultie 7/2	\$	4,680.00
	2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
;	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,038.00
	Your total liabilities	\$	29,038.00
Part 3	3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,928.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,546.00
Part 4	4: Answer These Questions for Administrative and Statistical Records		
6. <i>I</i>	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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		Docume	nt	Page 9 of 54	
	Jarrod C Hull			3	
Debtor 2	Michelle L Hull			Case number (if known)	

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 Jarrod C Hull Middle Name Last Name First Name Debtor 2 Michelle L Hull (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number П Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Ford Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Taurus** Model ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2003 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 200,000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another dealer value \$1,000 \$500.00 \$500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Buick** 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Century Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2001 Year: Debtor 2 only Current value of the Current value of the 200,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another dealer value \$1,2000 \$1,000.00 \$1,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

		Debtors' cloth	ing, with estimated reta	il value of \$400	\$150.00
					_
	lothes Examples: Everyday c No Yes. Describe	lothes, furs, leather	coats, designer wear, shoes	, accessories	
<i>E</i>	rearms Examples: Pistols, rifle No Yes. Describe	es, shotguns, ammu	nition, and related equipmen	t	
		bicycle, with e	estimated retail value of	\$150	\$75.00
		camera, with e	estimated retail value of	\$150	\$75.00
	Yes. Describe		antimanta di secte il 1918 di 1918	0450	\$75.00
Ex	uipment for sports a camples: Sports, photo musical insti No	ographic, exercise, a	and other hobby equipment;	bicycles, pool tables, golf clubs, ski	is; canoes and kayaks; carpentry tools;
_	No Yes. Describe				
Ex	other collect	d figurines; paintings ions, memorabilia, c	•	oks, pictures, or other art objects; s	tamp, coin, or baseball card collections;
			DVD players, 4 computed retail value of \$700	ers, DVDs, CDs, 2 stereos,	\$350.00
_	Yes. Describe				
Ex			ideo, stereo, and digital equip media players, games	oment; computers, printers, scanne	rs; music collections; electronic devices
		dining room s	es, 3 dressers, 2 sofas, I et, 5 bookcases, 3 desk en, etc. with estimated r	s, entertainment center,	\$600.00
Ex			ns, china, kitchenware		
6. Ho	usehold goods and	furnishings			Do not deduct secured claims or exemptions.
	Describe Your Person		Items interest in any of the follow	ring items?	Current value of the portion you own?
				om Part 2, including any entries	
Debto Debto			Document	Page 11 of 54 Case numbe	τ (if known)
			Document	F 805 11 01 04	

Official Form 106A/B

Yes. Describe.....

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Debtor 1 Debtor 2	Jarrod C Hul Michelle L H			Case number (if known	n)
		jewelr	y, with estimate	ed retail value of \$150	\$75.00
Exam	arm animals ples: Dogs, cats, b	oirds, ho	rses		
■ No □ Yes.	Describe				
□ No	ther personal and Give specific info		-	d not already list, including any health aids you did not list	
_ 103.	Give specific fine			imated retail value of \$30	\$15.00
		hand	and power tools	s, with estimated retail value of \$1,100	\$550.00
		lawnn	nower, with esti	imated retail value of \$40	\$20.00
for P	art 3. Write that r	number	here	Part 3, including any entries for pages you have attached	\$1,910.00
	escribe Your Financ wn or have any le			in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No			our wallet, in your	home, in a safe deposit box, and on hand when you file your pet	
				Cash on hand	\$200.00
Exam _i □ No	institutions. I			ecounts; certificates of deposit; shares in credit unions, brokeragents with the same institution, list each. Institution name:	e houses, and other similar
■ Yes.		17 1	savings	Members Alliance Credit Union	\$170.00
		17.2.	checking	Members Alliance Credit Union	\$125.00
		17.3.	checking	Members Alliance Credit Union	\$0.00
		17.4.	checking	Members Alliance Credit Union	\$25.00

Official Form 106A/B Schedule A/B: Property page 3

Case 17-82118 Doc 1 Filed 09/08/17 Entered 09/08/17 12:22:20 Desc Main Page 13 of 54 Document Debtor 1 Jarrod C Hull Michelle L Hull Debtor 2 Case number (if known) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$650.00 401k 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Debto Debto		Document F	Page 14 of 54 Case number (if known)	
28. T a	x refunds owed to you			
	No			
	Yes. Give specific information about them, i	ncluding whether you alread	y filed the returns and the tax years	
	mily support	accast accompany abilid accompany	into	
	• • • • • • • • • • • • • • • • • • • •	ousai support, chiid support	maintenance, divorce settlement, property	settiement
	Yes. Give specific information			
	·			
	her amounts someone owes you xamples: Unpaid wages, disability insurance benefits; unpaid loans you made		s, sick pay, vacation pay, workers' compen	sation, Social Security
	No			
	Yes. Give specific information			
		; health savings account (HS	A); credit, homeowner's, or renter's insuran	ce
	Yes. Name the insurance company of each	policy and list its value.		
	Company name		Beneficiary:	Surrender or refund value:
	Life insuranc	e policy with death ben	efit	\$0.00
22 4	by interest in property that is due you fro	m camaana wha has diad		
lf s∈	omeone has died.		rance policy, or are currently entitled to rece	ive property because
If s □	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes,	ect proceeds from a life insu t you have filed a lawsuit o	or made a demand for payment	ive property because
33. C I	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes,	ect proceeds from a life insu t you have filed a lawsuit o	or made a demand for payment	ive property because
33. C l	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim	ect proceeds from a life insu t you have filed a lawsuit of insurance claims, or rights to	or made a demand for payment	
33. CI E	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim	ect proceeds from a life insu t you have filed a lawsuit of insurance claims, or rights to	or made a demand for payment sue	
33. CI E E C C C C C C C C C C C C C C C C	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims of No Yes. Describe each claim	ect proceeds from a life insu t you have filed a lawsuit of insurance claims, or rights to of every nature, including of	or made a demand for payment sue	
33. Cl E	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims of No Yes. Describe each claim	ect proceeds from a life insu t you have filed a lawsuit of insurance claims, or rights to of every nature, including of	or made a demand for payment sue	
33. CI E	you are the beneficiary of a living trust, exponence has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims on No Yes. Describe each claim ny financial assets you did not already list No Yes. Give specific information	ect proceeds from a life insult of the second of every nature, including of	or made a demand for payment sue counterclaims of the debtor and rights to	
33. CI E = 34. Of 35. Ai = 36. Ai	you are the beneficiary of a living trust, exponeone has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims of No Yes. Describe each claim	ect proceeds from a life insult of you have filed a lawsuit of insurance claims, or rights to of every nature, including of	or made a demand for payment sue counterclaims of the debtor and rights to entries for pages you have attached	
33. CI E = 34. Of 35. Ai = 36. Ai	you are the beneficiary of a living trust, exponence has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims on No Yes. Describe each claim ny financial assets you did not already list No Yes. Give specific information Add the dollar value of all of your entries or Part 4. Write that number here	ect proceeds from a life insult of tyou have filed a lawsuit of insurance claims, or rights to of every nature, including of	entries for pages you have attached	set off claims
33. CI E	you are the beneficiary of a living trust, exponence has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims on No Yes. Describe each claim hy financial assets you did not already list No Yes. Give specific information Add the dollar value of all of your entries or Part 4. Write that number here	t you have filed a lawsuit of insurance claims, or rights to of every nature, including of the from Part 4, including any	entries for pages you have attached	set off claims
33. CI E	you are the beneficiary of a living trust, exponence has died. No Yes. Give specific information aims against third parties, whether or no xamples: Accidents, employment disputes, No Yes. Describe each claim her contingent and unliquidated claims on No Yes. Describe each claim ny financial assets you did not already list No Yes. Give specific information Add the dollar value of all of your entries or Part 4. Write that number here	t you have filed a lawsuit of insurance claims, or rights to of every nature, including of the from Part 4, including any	entries for pages you have attached	set off claims

Current value of the portion you own?
Do not deduct secured claims or exemptions.

	Case 17-82118		Desc Main
Debt	or 1 Jarrod C Hull	Page 15 of 54	
Debt	- Indicio E Huii	Case number (if known)	
	accounts receivable or commissions you already earned		
	Yes. Describe		
39. C	Office equipment, furnishings, and supplies		
	Examples: Business-related computers, software, modems, printers, cop	piers, fax machines, rugs, telephones, desks, c	hairs, electronic devices
	No Yes. Describe		
_	Tes. Describe		
40. N	Machinery, fixtures, equipment, supplies you use in business, and t	ools of your trade	
	l No	·	
	Yes. Describe		
	work tools, with estimated retail value	of \$200	\$100.00
	nventory		
	No Yes. Describe		
	Yes. Describe		
42 l ı	nterests in partnerships or joint ventures		
	No		
	Yes. Give specific information about them		
	Name of entity:	% of ownership:	
40.	Northwest Hate mailing Hate as other compilations		
	Customer lists, mailing lists, or other compilations No.		
	Do your lists include personally identifiable information (as defined in 11 U.S	S.C. § 101(41A))?	
	(40 0011100 11 1 1 0 10		
	■ No		
	☐ Yes. Describe		
	ny business-related property you did not already list No		
	Yes. Give specific information		
	·		
45.	Add the dollar value of all of your entries from Part 5, including an for Part 5. Write that number here		\$100.00
	101 Turt 0. Write that hamber nere-		
Part		or Have an Interest In.	
	If you own or have an interest in farmland, list it in Part 1.		
	o you own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
	No. Go to Part 7.		
	Yes. Go to line 47.		
Part	7: Describe All Property You Own or Have an Interest in That You Did	Not List Ahove	
Part	Describe All Property Tou Own or have an interest in That You Did	INUL LIST ADOVE	
	Oo you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
	Examples. Coason nokots, country dub membership		

Official Form 106A/B Schedule A/B: Property page 6

 $\hfill \square$ Yes. Give specific information.......

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Jarrod C Hull Debtor 1 Debtor 2 Michelle L Hull Case number (if known) 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$1,500.00 Part 3: Total personal and household items, line 15 57. \$1,910.00 Part 4: Total financial assets, line 36 58. \$1,170.00 59. Part 5: Total business-related property, line 45 \$100.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$4,680.00 \$4,680.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,680.00

Official Form 106A/B Schedule A/B: Property page 7

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Page 17 of 54 Document Fill in this information to identify your case: Debtor 1 Jarrod C Hull Middle Name Last Name First Name Debtor 2 Michelle L Hull (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Schedule A/B that lists this property	portion you own	Ame	bunt of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	2003 Ford Taurus 200,000 miles dealer value \$1,000	\$500.00	•	\$500.00	735 ILCS 5/12-1001(c)	
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	2 beds, 3 tables, 3 dressers, 2 sofas, loveseat, washer, dryer, dining room	\$600.00		\$600.00	735 ILCS 5/12-1001(b)	
	set, 5 bookcases, 3 desks, entertainment center, microwave oven, etc. with estimated retail value of \$1,200 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	3 TVs, VCR, 3 DVD players, 4	\$350.00		\$350.00	735 ILCS 5/12-1001(b)	
computers, DVDs, CDs, 2 stereos, with estimated retail value of \$700 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit			
	camera, with estimated retail value of \$150	\$75.00		\$75.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit		

Entered 09/08/17 12:22:20 Desc Main Filed 09/08/17 Case 17-82118 Doc 1 Document Page 18 of 54 Jarrod C Hull Debtor 1 Michelle L Hull Case number (if known) Debtor 2 Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B

	Schedule A/B			
bicycle, with estimated retail value of \$150	\$75.00		\$75.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 9.2			100% of fair market value, up to any applicable statutory limit	
Debtors' clothing, with estimated retail value of \$400	\$150.00		\$150.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
jewelry, with estimated retail value of \$150	\$75.00		\$75.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
cell phones, with estimated retail value of \$30	\$15.00	-	\$15.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
hand and power tools, with estimated retail value of \$1,100	\$550.00		\$550.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 14.2			100% of fair market value, up to any applicable statutory limit	
lawnmower, with estimated retail value of \$40	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 14.3			100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B: 16.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale AVD. 1911			100% of fair market value, up to any applicable statutory limit	
savings: Members Alliance Credit Union	\$170.00		\$170.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
checking: Members Alliance Credit Union	\$125.00		\$125.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
checking: Members Alliance Credit Union	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
401k Line from Schedule A/B: 21.1	\$650.00			735 ILCS 5/12-1006
enie nom <i>Schedule PVD.</i> 21.1			100% of fair market value, up to any applicable statutory limit	

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Jarrod C Hull Debtor 1 Michelle L Hull Debtor 2 Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B work tools, with estimated retail 735 ILCS 5/12-1001(d) \$100.00 \$100.00 value of \$200 Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

mation to identify your	case:		
Jarrod C Hull			
First Name	Middle Name	Last Name	
Michelle L Hull			
First Name	Middle Name	Last Name	
inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
			☐ Check if this is a
	Jarrod C Hull First Name Michelle L Hull First Name	First Name Middle Name Michelle L Hull First Name Middle Name	Jarrod C Hull First Name Middle Name Last Name Michelle L Hull First Name Middle Name Last Name

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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	Case 17-02110 1	Document	Page 2	1 of 54	22.20 Des	oc mani
Fill in this	information to identify your					
Debtor 1	Jarrod C Hull					
202101	First Name	Middle Name	Last Name		_	
Debtor 2	Michelle L Hull				_	
(Spouse if, filir	ng) First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		_	
Case numl	her					
(if known)						Check if this is an
					а	mended filing
Official	Form 106E/F					
		ho Have Unsecured	Claime			12/15
		e Part 1 for creditors with PRIORI		Don't O for our distance with	NONDRIODITY -I-:	
Schedule D: eft. Attach t name and ca	Creditors Who Have Claims Sec he Continuation Page to this page ase number (if known).	ired Leases (Official Form 106G). ured by Property. If more space is le. If you have no information to re	needed, copy	the Part you need, fill i	t out, number the en	tries in the boxes on the
	List All of Your PRIORITY Ur					
•	creditors have priority unsecure	d claims against you?				
	Go to Part 2.					
☐ Yes.		N Hannaumad Olaima				
	List All of Your NONPRIORIT					
_	creditors have nonpriority unsec					
⊔ No.	You have nothing to report in this p	art. Submit this form to the court with	n your other scho	edules.		
Yes.						
unsecur	red claim, list the creditor separatel	aims in the alphabetical order of the year cach claim. For each claim liste ist the other creditors in Part 3.If you	d, identify what	type of claim it is. Do not	list claims already inc	cluded in Part 1. If more
						Total claim
4.1 C a	apital One	Last 4 digits of ac	count number	1994		\$492.00
	npriority Creditor's Name					
	D Box 30281 alt Lake City, UT 84130-02	When was the deb	t incurred?			-
	mber Street City State Zlp Code		file, the claim	is: Check all that apply		
Wh	no incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	other Type of NONPRIO	RITY unsecure	d claim:		
	Check if this claim is for a com	munity				
del				aration agreement or dive	orce that you did not	
	the claim subject to offset?	report as priority cla		ng plans, and other simila	ar dehts	
	No				ai ucuio	
	Yes	Other. Specify	creait purc	nases		

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Debtor :	1 Jarrod C Hull 2 Michelle L Hull	Case number (if know)	
4.2	Catherine's	Last 4 digits of account number 8785	\$600.00
	Nonpriority Creditor's Name PO Box 182789 Columbus. OH 43218-2789	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify credit purchases	
4.3	City of Rockford Ambulance	Last 4 digits of account number	\$1,240.00
	Nonpriority Creditor's Name Rockford Mercantile 2502 S Alpine	When was the debt incurred?	
	Rockford, IL 61108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.4	Credit One Bank, NA Nonpriority Creditor's Name	Last 4 digits of account number 8515	\$712.00
	PO Box 98873 Las Vegas, NV 89193-8873	When was the debt incurred?	
_	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify credit purchases	
		— Outer, Specify	

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Debtor Debtor	Jarrod C Hull Michelle L Hull	Case number (if know)	
4.5	Credit One Bank, NA	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name LVNV Funding LLC PO Box 10497 Greenville, SC 29603-0497	When was the debt incurred?	,
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
	_ '	Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.6	OSF Saint Anthony Medical Center	Last 4 digits of account number	\$4,495.00
	Nonpriority Creditor's Name 5666 East State Street Rockford, IL 61108	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.7	OSF Saint Anthony Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Rockford Mercantile 2502 S Alpine	When was the debt incurred?	
	Rockford, IL 61108		
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify notice only	
	169	Other. Specify Tottoe only	

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Debtor 2	Jarrod C Hull Michelle L Hull	Case number (if know)	
4.8	Phil Hertihey, DDS	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name Account Recovery Solution 5183 Harlem Rd #7	When was the debt incurred?	• • • • • • • • • • • • • • • • • • • •
_	Loves Park, IL 61111 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify dental	
4.9	Radiology Consultants of Rockford Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	Mutual Management Services 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	When was the debt incurred?	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify _ medical	
٠ ١	Rockford Anesthesiology Serv Nonpriority Creditor's Name	Last 4 digits of account number	\$275.00
	Account Recovery Solutions 5183 Harlem Rd #7	When was the debt incurred?	
_	Loves Park, IL 61111 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify medical	

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Debtor Debtor	1 Jarrod C Hull 2 Michelle L Hull	Case number (if know)	
4.1 1	Rockford Health Physicians	Last 4 digits of account number	\$9,500.00
	Nonpriority Creditor's Name 2300 N. Rockton Ave. Rockford, IL 61103	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.1	Rockford Health Physicians	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Allied Business Accounts 300-1/2 S. 2nd St.	When was the debt incurred?	
	Clinton, IA 52733-1600 Number Street City State Zlp Code	As of the date year file, the plains in Charles II that are h	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.1	Rockford Urological Associates	Last 4 digits of account number	\$290.00
	Nonpriority Creditor's Name 351 Executive Parkway Rockford, IL 61101	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	

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Debtor Debtor	1 Jarrod C Hull 2 Michelle L Hull	Case number (if know)	
4.1 4	Swedish American Hospital	Last 4 digits of account number	\$10,150.00
	Nonpriority Creditor's Name 1401 East State Street Rockford, IL 61104	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	
4.1 5	Swedish American Hospital	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Dennis Brebner & Assoc 860 S Northpoint Waukegan, IL 60085	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice only	
4.1	Swedish American MSO Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Mutual Management Service 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	□ 169	Other. Specify notice only	

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Debtor 1 Jarrod C Hull Debtor 2 Michelle L Hull Case number (if know) 4.1 Torrid 2672 \$584.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 182789 Columbus, OH 43218-2789 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit purchases ☐ Yes 4.1 Viking Magazine Service \$600.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 201059 When was the debt incurred? Minneapolis, MN 55420 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit purchases ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 6d. Total Priority. Add lines 6a through 6d. 0.00 **Total Claim** 6f. 6f. Student loans 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 6g.

Official Form 106 E/F

you did not report as priority claims

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Debtor 1 Debtor 2 Michelle L Hull Case number (if know)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6j. Total Nonpriority. Add lines 6f through 6i.
6j. \$ 29,038.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jarrod C Hull			
	First Name	Middle Name	Last Name	
Debtor 2	Michelle L Hull			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Merritt Kuhn, landlord

State what the contract or lease is for
rental of duplex apartment, month to month

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		Docume	nt Page 30 c	of 54	
Fill in this i	nformation to identify your	case:			
Debtor 1	Jarrod C Hull First Name	Middle Nosse	Loot Name		
Debtor 2	Michelle L Hull	Middle Name	Last Name		
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors			12/15
eople are fill it out, an	iling together, both are equ	ally responsible for suppl boxes on the left. Attach	lying correct informat the Additional Page t	ns complete and accurate as pation. If more space is needed, to this page. On the top of an	, copy the Additional Page,
1. Do y	ou have any codebtors? (If	you are filing a joint case, d	o not list either spouse	as a codebtor.	
■ No □ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana			ry? (Community property states ington, and Wisconsin.)	s and territories include
	Go to line 3. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make	r if your spouse is filing with sure you have listed the cred 06G). Use Schedule D, Sched	litor on Schedule D (Official
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The creditor to Check all schedules that a	o whom you owe the debt apply:
3.1				☐ Schedule D, line	
	ame			□ Schedule E/F, line □	
				☐ Schedule G, line	
	umber Street ity	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	ame			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
N	umber Street			_	
	ity Street	State	ZIP Code		

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Deb	otor 1 Jarrod C	Hull		
	otor 2 Michelle	L Hull		
Unit	ted States Bankruptcy Court fo	the: NORTHERN DISTRI	CT OF ILLINOIS	
(If kn	e number own) fficial Form 1061		_	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
	ficial Form 106l			MM / DD/ YYYY
S	chedule I: Your I	icome		12/15
spoi				about your spouse. If more space is needed,
spoi	t1: Describe Employment	m. On the top of any addit	rith you, do not include information ional pages, write your name and ca	about your spouse. If more space is needed, ase number (if known). Answer every question
spoi attac Par	Describe Employment information.	m. On the top of any addit	rith you, do not include information ional pages, write your name and ca	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse
spoi attac Par	t1: Describe Employment	m. On the top of any addit	rith you, do not include information ional pages, write your name and ca	about your spouse. If more space is needed, ase number (if known). Answer every question
spoi attac Par	Describe Employment information. If you have more than one joi attach a separate page with	m. On the top of any additent	ith you, do not include information ional pages, write your name and ca Debtor 1 Employed	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed
spoi attac Par	Describe Employment information. If you have more than one joi attach a separate page with information about additional	m. On the top of any additent Employment status Occupation	Debtor 1 Employed Not employed	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
spoi attac Par	Describe Employment information. If you have more than one joi attach a separate page with information about additional employers. Include part-time, seasonal, or	m. On the top of any addit	Debtor 1 Employed Not employed CNC Operator	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed cashier
spoi attac Par	Describe Employment information. If you have more than one joi attach a separate page with information about additional employers. Include part-time, seasonal, of self-employed work. Occupation may include stude	m. On the top of any addit	Debtor 1 Employed Not employed CNC Operator M & R Custom Mill Work Belvidere, IL 61008	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed cashier Meijer
spoi attac Par	Describe Employment information. If you have more than one joi attach a separate page with information about additional employers. Include part-time, seasonal, of self-employed work. Occupation may include stud or homemaker, if it applies.	m. On the top of any additions Employment status Occupation Employer's name Employer's address How long employed	Debtor 1 Employed Not employed CNC Operator M & R Custom Mill Work Belvidere, IL 61008	about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed cashier Meijer

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. Calculate gross Income. Add line 2 + line 3.

			non-	filing spouse
2.	\$	2,350.00	\$	1,300.00
3.	+\$	0.00	+\$	0.00
4.	\$	2,350.00	\$	1,300.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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Jarrod C Hull Debtor 1 Debtor 2 Michelle L Hull Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 2.350.00 1.300.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 510.00 160.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 52.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 510.00 212.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 \$ 1,840.00 1,088.00 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a \$ 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 \$ 0.00 Specify: 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 1,840.00 1,088.00 \$ 2,928.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,928.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain: Income fluctuates with hours of employment.

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Fill	in this informa	ition to identify yo	ur case:			1		
	otor 1	Jarrod C Hul				Cho	eck if this is:	
		Janou C nui	•				An amended fili	ng
	otor 2	Michelle L H	ull					howing postpetition chapter of the following date:
(Spo	ouse, if filing)						15 expenses as	of the following date.
Unit	ed States Bankr	ruptcy Court for the:	NORTH	ERN DISTRICT OF ILLI	NOIS		MM / DD / YYY	Υ
1	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your I	Exper	ises				12/1
info	ormation. If m		eded, atta	ch another sheet to thi				e for supplying correct te your name and case
Par		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to	o line 2. es Debtor 2 live i	n a conar	ata hausahald?				
	= 1es. Doe		ii a sepai	ate nousenoiu:				
			t file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			adult child		18	Yes
								□ No □ Yes
								□ No
								Yes
								□ No □ Yes
3.		enses include		No	-			Lifes
		f people other th d your depender	nan 👝	Yes				
		ate Your Ongoir						
exp								Chapter 13 case to report p of the form and fill in the
the		h assistance and		government assistance luded it on <i>Schedule I:</i>			Your e	expenses
(01	ilciai FOIIII 10	,01.)						мроносс
4.		or home owners and any rent for the		ses for your residence r lot.	Include first mortgag	e 4.	\$	525.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
		maintenance, re				4c.	·	0.00
5.		owner's associati		dominium dues o ur residence , such as h	nome equity loans	4d. 5.	·	0.00
J.	Auditional I	igage payille	into ioi yt	ai residence, such ds l	ionio oquity idalis	5.	Ψ	0.00

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	arrod C Hull Nichelle L Hull	Case num	ber (if known)	
6. Utilities	::			
6a. E	lectricity, heat, natural gas	6a.	\$	150.00
6b. V	Vater, sewer, garbage collection	6b.	\$	17.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. C	Other. Specify: cell phones	6d.	\$	156.00
t	//internet		\$	145.00
7. Food a	nd housekeeping supplies		\$	800.00
3. Childca	are and children's education costs	8.	\$	0.00
. Clothin	g, laundry, and dry cleaning	9.	\$	100.00
0. Person	al care products and services	10.	\$	25.00
1. Medica	I and dental expenses	11.	\$	50.00
	ortation. Include gas, maintenance, bus or train fare.			450.00
	nclude car payments.	12.	·	450.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
	ble contributions and religious donations	14.	\$	0.00
5. Insurar				
	nclude insurance deducted from your pay or included in lines 4 or 20. ife insurance	15a.	c	0.00
	lealth insurance	15a. 15b.	*	0.00
	ehicle insurance	15b.		78.00
	other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify	·	16.	\$	0.00
	nent or lease payments: Far payments for Vehicle 1	17a.	c	0.00
	• •	17a. 17b.	·	0.00
	ar payments for Vehicle 2 hther. Specify:	17b. 17c.	· -	0.00
	other. Specify:	— 176. 17d.	·	0.00
	ayments of alimony, maintenance, and support that you did not report as	17u.	Ψ	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specify		19.	· -	
	eal property expenses not included in lines 4 or 5 of this form or on Sched			
	fortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
	roperty, homeowner's, or renter's insurance	20c.	· -	0.00
	faintenance, repair, and upkeep expenses	20d.	·	0.00
20e. H	lomeowner's association or condominium dues	20e.	·	0.00
. Other:	Specify:	21.	+\$	0.00
	te your monthly expenses			
	d lines 4 through 21.		\$	2,546.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Ad	d line 22a and 22b. The result is your monthly expenses.		\$	2,546.00
	te your monthly net income.			
	copy line 12 (your combined monthly income) from Schedule I.	23a.		2,928.00
23b. C	copy your monthly expenses from line 22c above.	23b.	-\$	2,546.00
	ubtract your monthly expenses from your monthly income. he result is your <i>monthly net income</i> .	23c.	\$	382.00
For exar	expect an increase or decrease in your expenses within the year after you nple, do you expect to finish paying for your car loan within the year or do you expect your not to the terms of your mortgage?	ı file this nortgage _l	s form? payment to increa	se or decrease because of a
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Jarrod C Hull				
	First Name	Middle Name	Las	st Name	
Debtor 2	Michelle L Hull				
(Spouse if, filing)	First Name	Middle Name	Las	st Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINO	IS	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
Doclara	tion About s	n Individual	Dobt	or's Schedules	
Declara	HOH ADOUL &	ili iliuiviuuai	Dent	or a acriedules	12/15
ir two married p	eopie are ming togethe	r, both are equally respon	isible for s	supplying correct information.	
You must file th	is form whenever you f	ile bankruptcy schedules	or amende	ed schedules. Making a false st	atement, concealing property, or
			ruptcy cas	e can result in fines up to \$250	,000, or imprisonment for up to 20
years, or both. 1	18 U.S.C. §§ 152, 1341, ′	l519, and 3571.			
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attorr	ney to help	you fill out bankruptcy forms?	•
■ No					
☐ Yes.	Name of person				ankruptcy Petition Preparer's Notice,
				Declarat	ion, and Signature (Official Form 119)
Under nens	alty of periury I declare	that I have read the summ	nary and s	chedules filed with this declara	ation and
	re true and correct.	that I have read the Sum	nary and s	chedules filed with this deciar	anon and
•					
	rod C Hull		X	/s/ Michelle L Hull	
	d C Hull			Michelle L Hull	
Signatu	re of Debtor 1			Signature of Debtor 2	

Date September 8, 2017

Date September 8, 2017

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Fill in	this inforn	nation to identify you	r case:			
Debtor	· 1	Jarrod C Hull				
5.1.		First Name	Middle Name	Last Name		
Debtor (Spouse		Michelle L Hull First Name	Middle Name	Last Name		
Linited	States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Officeu	States Dai	ikiupicy Court for the.	NORTHERN DISTRICT	OI ILLINOIS		
Case r	number _				_	Check if this is an amended filing
		rm 107 of Financial	Affairs for Indiv	iduals Filing for B	Bankruptcy	4/1
informa numbe	ation. If m r (if knowr	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	are filing together, both are to this form. On the top of an		
Part 1		r current marital statu	irital Status and Where Yo	ou Lived Before		
	ilat lo you.	ourront maritar otate				
	Married Not mar	ried				
2. Du	uring the la	ast 3 years, have you	lived anywhere other than	n where you live now?		
	No Yes. Lis	t all of the places you I	ived in the last 3 years. Do	not include where you live nov	v.	
D	ebtor 1 Pr	ior Address:	Dates Debtor lived there	1 Debtor 2 Prior Ac	ddress:	Dates Debtor 2 lived there
				egal equivalent in a commun evada, New Mexico, Puerto R		
	No Yes. Ma	ıke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Official Form 106H).		
Part 2	Explai	n the Sources of You	r Income	,		
4. Di	d you have	e any income from en	nployment or from operat	ing a business during this you		ndar years?
If y	ou are filin	ng a joint case and you	have income that you recei	ive together, list it only once ur	nder Debtor 1.	
		in the details.				
	100.11	in the details.				
			Debtor 1	Creen inner	Debtor 2	Cross in come
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,000.00	■ Wages, commissions, bonuses, tips	\$9,800.00

Official Form 107

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Michelle L Hull Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$4,500.00 \$12,000.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$17,000.00 \$0.00 ☐ Wages, commissions, ■ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$20,150.00 \$4,275.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment** Amount you Was this payment for ... Total amount paid still owe

Jarrod C Hull

Debtor 1

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Deb	tor 2	Michelle L Hull		Cas	se number (if knowr	1)	
	Inside of wh	in 1 year before you filed for bankruptoers include your relatives; any general patich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which y g securities; and	ou are a genera any managing a	al partner; corporation: gent, including one fo
	_	No					
		Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	insid	in 1 year before you filed for bankrupto ler? de payments on debts guaranteed or cosi				account of a d	ebt that benefited an
		No Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pari	4:	Identify Legal Actions, Repossession	s, and Foreclosures				
	List a modif	in 1 year before you filed for bankrupto ill such matters, including personal injury fications, and contract disputes.					
	_	Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
	Chec	in 1 year before you filed for bankruptook all that apply and fill in the details below		erty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?
	_	Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property Explain what happened	I	Date	e	Value of the property
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.	tcy, did any creditor, inc		nancial institutio	on, set off any a	amounts from your
		ditor Name and Address	Describe the action the	creditor took	Date	e action was	Amount
	court	in 1 year before you filed for bankrupto t-appointed receiver, a custodian, or an No Yes		erty in the possess			efit of creditors, a
Part	t 5 :	List Certain Gifts and Contributions					
13.		in 2 years before you filed for bankrup No Yes. Fill in the details for each gift.		s with a total value			
		s with a total value of more than \$600 person	Describe the gifts			es you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

Debtor 1

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	otor 1 Jarrod C Hull otor 2 Michelle L Hull			Case number (if known)			
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ■ Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed		Dates you contributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did	you lose anytl	hing because of the	t, fire, other disaster,		
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the least the amount that insurance has paid. Indeed, the claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost		
Par	t 7: List Certain Payments or Transfer	's						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment		
	Bankruptcy Clinic 1 Court Place Rockford, IL 61101		Attorney Fees		2017	\$700.00		
	Summit Financial Education		Credit Counseling		2017	\$15.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al No Yes. Fill in the details.	ur busin s made a	ess or financial affairs? as security (such as the granting of a s		erty to anyone, othe			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made		
	Person's relationship to you							

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Debtor 1 Jarrod C Hull
Debtor 2 Michelle L Hull

Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No						
	Yes. Fill in the details. Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was	
						made	
Pa	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	t Boxes, and St	orage Unit	'S		
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated.	other financial accou	nts; certificates	s of deposi			
	■ No □ Yes. Fill in the details.						
		ast 4 digits of ccount number	Type of accoinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year befor	re you filed for bankruptc	y?	
	No Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	,					
23.			ude any proper	ty you bor	rowed from, are storing fo	or, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Pai	t 10: Give Details About Environmental Inform	,					
For	the purpose of Part 10, the following definitions	s apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	e water, ground				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental	law, wheth	er you now own, operate	, or utilize it or used	
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jarrod C Hull
Debtor 2 Michelle L Hull

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of ar	ny release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Co	onnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	y of the following connections to any	business?			
	■ A sole proprietor or self-employed in a	a trade, profession, or other activity.	either full-time or part-time				
	☐ A member of a limited liability compar						
	☐ A partner in a partnership						
	☐ An officer, director, or managing exec	utive of a corporation					
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation					
	☐ No. None of the above applies. Go to Pa	rt 12.					
	Yes. Check all that apply above and fill in	the details below for each business	S.				
	Address	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.			
	(Number, Street, City, State and ZIP Code)	lame of accountant or bookkeeper	Dates business existed	·			
	Jarrod C. Hull	General Contractor	EIN:				
			From-To 2012-2017				
	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	r, did you give a financial statement t	to anyone about your business? Inclu	ide all financial			
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

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Debtor 1	Jarrod C Hull		o
Debtor 2	Michelle L Hull		Case number (if known)
Part 12:	Sign Below		
l have re	ad the answers on this Statement of	f Financial Δffairs ar	nd any attachments, and I declare under penalty of perjury that the answers
			, concealing property, or obtaining money or property by fraud in connection
			prisonment for up to 20 years, or both.
18 U.S.C	. §§ 152, 1341, 1519, and 3571.	•	
/s/ Jarr	od C Hull	/s/ Mid	chelle L Hull
	Jarrod C Hull		elle L Hull
Signature of Debtor 1			ture of Debtor 2
Date \$	September 8, 2017	Date	September 8, 2017
Did you	attach additional nages to Vour Stat	ement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	attach additional pages to Tour Stat	ement of Financial A	Analis for individuals rilling for bankruptcy (official roth):
☐ Yes			
Did you	pay or agree to pay someone who is	not an attorney to h	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	Name of Person Attach the Bal	nkruptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your			
Debtor 1	Jarrod C Hull			
	First Name	Middle Name	Last Name	
Debtor 2	Michelle L Hull			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
()				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Jarrod C Hull Debtor 2 Michelle L Hull				Case number (if known)			
n	ame:				perty and redeem it.	☐ Yes	
D	escription	n of		Retain the pro Reaffirmation	perty and enter into a Agreement.		
р	roperty		İ		perty and [explain]:		
S	ecuring d	ebt:	_				
Part	t 2: Lis	st Your Unexpired Pe	rsonal Property Leases				
For a	any unex e inform	pired personal prope ation below. Do not l	erty lease that you listed in	pired leases are	leases that are still in effe	expired Leases (Official Form 106G), fill ct; the lease period has not yet ended. 65(p)(2).	
Des	cribe yo	ur unexpired persona	al property leases			Will the lease be assumed?	
Les	sor's nam	ne: Merritt K ı	uhn, landlord			□ No	
						■ Yes	
	cription o perty:	f leased rental of	duplex apartment, mont	h to month			
Part	i 3: Sig	gn Below					
		y of perjury, I declare is subject to an une		itention about a	ny property of my estate th	nat secures a debt and any personal	
Χ	/s/ Jarı	od C Hull		χ /s	/ Michelle L Hull		
	Jarrod	C Hull		M	ichelle L Hull		
	Signatu	re of Debtor 1		Si	gnature of Debtor 2		
	Date	September 8, 20	17	Date	September 8, 2017		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82118 Doc 1 Filed 09/08/17 Entered 09/08/17 12:22:20 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	Jarrod C Hull re Michelle L Hull		Case No.				
	- Monorio E Train	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEV FOR DI	TRTOR(S)			
				. ,			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filit be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or	to		
	For legal services, I have agreed to accept		\$	700.00			
	Prior to the filing of this statement I have received		\$	700.00			
	Balance Due		\$	0.00			
2.	\$ 335.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	n unless they are mem	bers and associates of my law f	irm.		
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				4		
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	cts of the bankruptcy	ase, including:			
	a. Analysis of the debtor's financial situation, and rendb. Preparation and filing of any petition, schedules, stac. Representation of the debtor at the meeting of creditd. [Other provisions as needed]	tement of affairs and plan which	ch may be required;				
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Applicable to Chapter 7: \$75.00 for each post-petition amendment to Schedules; \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement, and attendance at hearing if required by the court; \$250.00 per hour plus costs (when applicable) for all other representation.						
	Representation does not include defense dismissal proceedings, reinstatement proceedings or other adversary proceedings or other adversary proceedings of the approve reaffirmation agreements.	proceedings, judicial lien a oceedings or attendance a	voidances, post-pe	etition amendments, relief	_		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of ar s bankruptcy proceeding.	ny agreement or arrangement fo	or payment to me for r	epresentation of the debtor(s) in	l		
	September 8, 2017	/s/ Gary C. Fland	ders				
	Date	Gary C. Flander	s 6180219				
		Signature of Attorr Bankruptcy Clin					
		1 Court Place					
		Rockford, IL 611					
		815-962-7084 F Name of law firm	ax: 815-987-3759				
		Traine of tan film	rm				

Document Page 50 of 54 BANKRUPTCY CLINIC

GARY C. FLANDERS Attorney at Law

One Court Place, Suite 201 Rockford, Illinois 61101 Telephone: 815/962-7084

CONTRACT FOR CHAPTER 7 BANKRUPTCY SERVICES
This agreement is executed this
Type of Bankruptcy
Client retains attorney Gary C. Flanders to file a Chapter 7 bankruptcy. If the client determines at a later date that client desires to file a Chapter 13 bankruptcy, the parties shall execute a new fee contract setting forth the terms of such representation.
2. Services Provided by Attorney:
Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.
3. Fees
The base fee for the filing of the bankruptcy is \$ \(\) and filing fee \$335.00 for a total of \$ \(\) to be paid prior to filing and within six months of the date of this agreement. The amount of the filing fee may increase.
Additional costs required on a case-by-case basis include:
a). Mandatory prepetition credit counseling and post-petition financial education (all cases).
b). Tax transcripts
c). Credit report (recommended).
If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney and/or his staff is increased, the fee shall be increased accordingly to compensate the attorney for the additional time and expense in providing the legal

4. Terms of Payment

services.

- a). The fees shall be paid in full prior to the filing of the bankruptcy.
- b). Client has paid \$ 700 as a retainer fee. This amount has been earned upon receipt by the attorney and is not refundable.
- c). No earned portion of any fee received is refundable.

5. Services Not Provided Under the Base Fee

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreement (when in sole discretion of attorney a reaffirmation motion is required).

6. Compensation For Services Not Covered Under Base Fee

- a). It is understood that if attorney and client agree that attorney is to provide services described in paragraph 5 a separate retainer agreement detailing such services and associated costs will be signed by attorney and client.
- b). \$75.00 for preparation and filing of each amendment to the bankruptcy Schedules or Statement of Financial Affairs.
- c). \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement, and attendance at hearing if required by the court.
- d). \$500.00 for motion to reopen Chapter 7 case if client fails to satisfy post-petition financial education requirements.
- e). The client understands that if the client does not pay the fees as set forth above, the Attorney has no obligation to provide the services, and has the right to file a motion to withdraw as the attorney for the client.

7. Client's Obligations

The client's obligations are as follows:

- a). To pay the fees as set forth above.
- b). To provide accurately, honestly and in a timely manner, all the information including all documents necessary to prepare and file the Chapter 7 bankruptcy.
- c). To satisfy prepetition credit counseling and postpetition financial education requirements.
- d). To keep the attorney advised at all times of the client's address and telephone numbers.
- e). To attend the 341 Creditors Meeting and other hearings set in the case as advised by attorney.
- f). To provide any information requested of the client by the Chapter 7 Trustee, the U.S. Trustee, or any other party in interest, unless the Court rules that the client is not required to provide the information.
- g). To respond immediately to any requests of the client by the attorney or the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Gary C. Flanders

Client

Client

\ lient acknowledges receipt of a copy of this agreement.

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

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United States Bankruptcy Court Northern District of Illinois

In re	Jarrod C Hull Michelle L Hull		Case No.	
		Debtor(s)	Chapter	7
	VE	ERIFICATION OF CREDITOR M	IATRIX	
	Number of Creditors:		19	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	September 8, 2017	/s/ Jarrod C Hull Jarrod C Hull Signature of Debtor		
	September 8, 2017	/s/ Michelle L Hull		

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Catherine's PO Box 182789 Columbus, OH 43218-2789

City of Rockford Ambulance Rockford Mercantile 2502 S Alpine Rockford, IL 61108

Credit One Bank, NA PO Box 98873 Las Vegas, NV 89193-8873

Credit One Bank, NA LVNV Funding LLC PO Box 10497 Greenville, SC 29603-0497

Merritt Kuhn, landlord

OSF Saint Anthony Medical Center 5666 East State Street Rockford, IL 61108

OSF Saint Anthony Medical Center Rockford Mercantile 2502 S Alpine Rockford, IL 61108

Phil Hertihey, DDS Account Recovery Solution 5183 Harlem Rd #7 Loves Park, IL 61111

Radiology Consultants of Rockford Mutual Management Services 7177 Crimson Ridge Dr. #10 Rockford, IL 61107 Rockford Anesthesiology Serv Account Recovery Solutions 5183 Harlem Rd #7 Loves Park, IL 61111

Rockford Health Physicians 2300 N. Rockton Ave. Rockford, IL 61103

Rockford Health Physicians Allied Business Accounts 300-1/2 S. 2nd St. Clinton, IA 52733-1600

Rockford Urological Associates 351 Executive Parkway Rockford, IL 61101

Swedish American Hospital 1401 East State Street Rockford, IL 61104

Swedish American Hospital Dennis Brebner & Assoc 860 S Northpoint Waukegan, IL 60085

Swedish American MSO Mutual Management Service 7177 Crimson Ridge Dr. #10 Rockford, IL 61107

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